2009 DRAFTING REQUEST

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FE Sent For: NONE

Received: 02/02/2009 Wanted: As time permits For: John Nygren (608) 266-2343					Received By: pkahler Identical to LRB: By/Representing: Waylon Hurlburt														
										This file r	nay be shown	to any legislato	r: NO		Drafter: pkahler				
										May Cont	act:				Addl. Drafters:				
Subject:	Insuran	ce - miscellane	ous		Extra Copies:														
Submit vi	a email: YES																		
Requester	's email:	Rep.Nygre	n@legis.wis	consin.gov															
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No specif	ic pre topic gi	ven																	
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Instructi	ons:																		
See attach	ned																		
Drafting	History:		- 																
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required												
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<END>

2009 DRAFTING REQUEST

Bill

Received: 02/02/2009 Wanted: As time permits For: John Nygren (608) 266-2343					Received By: pkahler Identical to LRB: By/Representing: Waylon Hurlburt															
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Subject	: Insurar	ice - miscellan	eous		Extra Copies:															
Submit	via email: YES																			
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<END>

2009 DRAFTING REQUEST

Bill

Received: 02/02/2009	Received By: pkahler
Wanted: As time permits	Identical to LRB:
For: John Nygren (608) 266-2343	By/Representing: Waylon Hurlburt
This file may be shown to any legislator: NO	Drafter: pkahler
May Contact:	Addl. Drafters:
Subject: Insurance - miscellaneous	Extra Copies:
Submit via email: YES	
Requester's email: Rep.Nygren@legis.wisconsin	n.gov
Carbon copy (CC:) to:	
Pre Topic:	
No specific pre topic given	
Topic:	
Require insurer to provide separate information about cate experience information	astrophic claims when providing claims
Instructions:	
See attached	

Drafting History:

pkahler

<u>Vers.</u> <u>Drafted</u> <u>Reviewed</u> <u>Typed</u> <u>Proofed</u> <u>Submitted</u> <u>Jacketed</u> <u>Required</u>

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Bill Request Form

Legislative Reference Bureau One East Main Street, Suite 200

Legal Section 266-3561

You may t	use this form or t	alk direct	ly with the	LRB att	orney who	o will draft	the bill.	
Date Feb 2	,2009				.			
Legislator, agency, or	other person re	questing	this draft	Rep.	John	<u> </u>	ygrei	^
Person submitting red	,			Way	lon	Hurlb	1 aurt	266-23
Persons to contact fo			aft (names			oers)_W	bylon 126	Hurlbur 8-0200
Describe the problem	, including any h					o solve th	ne problem	n?
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Please attach a copy statute sections that i							you know	of an <u>y</u>
You may attach a may 2003 AB-67).	rked-up copy of a	any LRB	draft or pro	vide its	number (ə.g., 2005	5 LRB-234	5/1 or
Requests are confid this for you?	/ N	ated oth	erwise. M	ay we t	ell others	that we	are worki	ng on
If		Anyone v Any legis	vho asks? lator?	YES YES	NO NO			
O	nly the following	persons			***************************************			
Do you consider this	request urgent?	YES	NÔ	If yes,	please inc	dicate why	·	
Should we give this r	equest priority o	ver any p	pending red	quest of	this legis	lator, age	ncy, or pe	

Kahler, Pam

From:

Hurlburt1, Waylon

Sent:

Monday, February 02, 2009 8:59 AM Kahler, Pam

To: Cc:

Dodge, Tamara

Subject:

Bill Draft Request

Attachments:

Draft Request.pdf; AB-855.pdf; 2009 Drafting Attachment.pdf







(54 KB)

Draft Request.pdf AB-855.pdf (15 KB) 2009 Drafting Attachment.pdf (...

Pam,

Can we get a re-draft of 2007 AB 855?

3630

Thanks,

Waylon Hurlburt Legislative Aide Office of Representative John Nygren 89th Assembly District (608)266-2343

From: Dan Schwartzer [mailto:dan@ewahu.org]
Sent: Wednesday, December 05, 2007 1:33 PM

To: 'Rep.lasee@legis.wisconsin.gov'

Subject: Legislation

Hi Frank,

Not sure if you recall all of the provisions of WAHU's reform health care reform plan, but one measure included a claims data provision. The issue Involves the right of an employer to request claims data from their insurance company when they are trying to competitively shop for coverage. Right now, if an employer that has over 50 employees requests claims experience, their existing insurance company is required to provide aggregate claims data. This would be the total number of claims (in dollar volume) that the insurer has paid on the employer's behalf, as well as a ratio to the total premium received by the insurer.

While this data is important for insurers in determining the proposal they would give to the employer, the law is outdated and should also include shock loss claims. These are claims on individuals that exceed a certain dollar threshold. Without shock loss claims data, many insurers are either not providing a competitive quote, or they are rating the plan higher than it might otherwise have to be. In order to remove one of the barriers for employers to competitively shop for insurance, we are proposing that the current law to provide claims data be expanded to include shock loss claims.

Below is a quick overview of what we are trying to accomplish. We would like to ask if you would be willing to be the lead author of the bill. I would be happy to meet you to answer any questions you have. Let me know.

Thanks

Dan Schwartzer WAHU

CLAIMS DATA LEGISLATION

The proposed legislation would affect all ilcensed insurance companies, both domestic and foreign, and health maintenance organizations that issue or administer group health benefit plans in the State of Wisconsin, as defined in s.632.745 (9). This legislation would not apply to group insurance policies of the following types: accident only; credit; dental; vision; Medicare supplement; long term care; or disability income.

From information available, companies should provide loss history information to the group health benefit plan within thirty (30) days of a written request. Reports need not be provided more often than twice annually. At a minimum, groups have a right to expect loss history information from current and former insurers, administrators or health maintenance organizations for any group covering two (2) or more individuals. These reports should be current and available to the group health benefit plan for three (3) years after termination of a policy.

The loss history information provided to the group health plan must include at least the following information based on a calendar year, policy year, or renewal period:

- Total premium received;
- 2. Total incurred claims;
- 3. Total paid claims;
- 4. Total pending claims; and

Description of any large or catastrophic claims exceeding ten thousand dollars (\$10,000). This legislation acknowledges that there are privacy issues to be considered in providing this information. Information should be provided in a format that does not disclose personally identifiable health information unless there is authority to do so.

This legislation would require compliance, with applicable penalties for non-compliance

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requirement

HCC Life Insurance Company (HCC Life) is proud to notify our clients of more successful legislation benefiting the self-funded industry. Georgia law (O.C.G.A. 33-30-13.1) was recently modified to require that insurers furnish claims experience within the 30 days of the policyholder's request:

All insurers shall furnish, regardless of the rating methodology used, claims experience to group policyholders within 30 days of any policyholder's request unless such information has been furnished to the group policyholder within the preceding six months. Such claims experience shall be furnished for all groups of 51 or more covered employees, members, or enrollees, not including dependents, and shall include, but shall not be limited to:

- (A) Earned premiums separated by policy year for at least the last two policy years, if applicable;
- (B) Total paid claims and total incurred claims, inclusive of any high amount or pooled claims, including both capitated and noncapitated expenses set forth in the same manner as premiums; and
- (C) Any amounts in excess of the individual pooling or stop loss point applicable to the group.



State of Misconsin 2007 - 2008 LEGISLATURE 2009-2010

2009 x

February 21, 2008 - Introduced by Representatives F. LASEE and NYGREN, cosponsored by Senators Darling and Schultz. Referred to Committee on Insurance.

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reservable !

AN ACT to amend 632.797 (1) (a) of the statutes; relating to: providing

descriptions of claims that exceed \$10.000. 2

Analysis by the Legislative Reference Bureau

Under current law, an insurer is required, at the request of a policyholder of a group health insurance policy or an employer that provides health care coverage to its employees through a multiple-employer trust, to provide the policyholder or employer with the policyholder's or employer's aggregate group health claims experience for the current policy period and for up to two immediately preceding periods. The information need not be provided unless the policyholder or employer provides coverage for at least 50 individuals. This bill requires an insurer, when providing health claims experience information to a policyholder or employer, to include at the request of the policyholder or employer a separate description of any large or catastrophic claims exceeding \$10,000 that are included in the policyholder's or employer's aggregate group health claims experience.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 632.797 (1) (a) of the statutes is amended to read:

632.797 (1) (a) Except as provided in subs. (2) and (3), an insurer shall provide

the policyholder of a group or blanket disability insurance policy, or an employer that

ASSEMBLY BILL 855

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SECTION 1

provides health care coverage to its employees through a multiple-employer trust, with the policyholder's or the employer's aggregate group health claims experience for the current policy period, and for up to 2 policy periods immediately preceding the current policy period if the insurer provided coverage during those periods, upon request from the policyholder or employer. As part of the information required under this paragraph, an insurer shall, if a policyholder or employer so requests, include a separate description of any large or catastrophic claims exceeding \$10,000, or a higher amount at the request of the policyholder or employer, that are included in the policyholder's or employer's aggregate group health claims experience.

SECTION 2. Initial applicability.

(1) This act first applies to requests for aggregate group health claims experience that are made on the effective date of this subsection.

(END)

2 vsort 2-9

LRB-1910/fins PJK:...:..

2009-2010 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

INSERT 2-9

1	SECTION 1. 632.797 (6) of the statutes is amended to read:
2	632.797 (6) An insurer that provides aggregate health claims experience the
3	information under sub. (1) in compliance with this section is immune from civil
4	liability for its acts or omissions in providing such information.
	History: 1993 a. 448.

Basford, Sarah

From:

Hurlburt1, Waylon

Friday, February 20, 2009 8:51 AM Sent:

LRB.Legal To:

Draft Review: LRB 09-1910/1 Topic: Require insurer to provide separate information about catastrophic claims when providing claims experience information Subject:

Please Jacket LRB 09-1910/1 for the ASSEMBLY.